



TRICARE Service Center assists beneficiaries

Story by
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APG News

Located on the first floor of Kirk U.S. Army Health Clinic, the TRICARE Service Center is available to beneficiaries who have questions or issues with their insurance.

TRICARE is separated into three healthcare regions: North, South and West. TRICARE North's system is operated by military health contractor Health Net Federal Services. Health Net Federal Services also facilitates the TSC.

When beneficiaries first arrive at the TSC, the first point of contact is Ann Marie Bonomolo, the liaison between TRICARE, the military treatment facility and network providers.

Her duties include reviewing the patients' situations and advising them on what steps are needed to resolve their issues. Bonomolo also helps beneficiaries with claims' resolutions and portability issues.

The center also has a community representative. Etoi Upchurch-Jones is the primary point of contact for new providers to the TRICARE network. She educates providers by maintaining critical business and working relationships helping to ensure quality health care is provided to all beneficiaries.

Upchurch-Jones monitors any gaps in coverage if providers are no longer participating and conducts contract negotiations. She also accompanies the health benefits advisor for

briefings throughout APG, targeting audiences such as new Soldier units.

Jackie Daniels is the clear, legible report advocate with Health Net for TRICARE. She receives and coordinates medical reports and consults from outside providers to make sure all patient data is available for follow-up care with the beneficiary's medical care.

Enrollments, referrals and authorizations for surgeries can all be completed at the center, said Margaret Gibson, manager of the TSC.

Gibson recommends that beneficiaries visit the Health Net Federal Services Web site, <https://www.hnfs.net>, in addition to using the TSC.

"It is important that beneficiaries read up on their benefits before they

get sick," Gibson said. "They need to be knowledgeable before a crisis happens."

The Web site also offers valuable services such as viewing and paying bills online and providing information on diseases such as diabetes, she said.

One of the main reasons beneficiaries come to the center is because they have questions about explanations of benefits statements they receive after an appointment that breaks down the insurance benefits that were covered or didn't cover.

"Some people do not know how to read the explanations and don't understand that they are not bills," Gibson said.

Gibson said some retirees aren't

aware they have TRICARE because they use other types of insurance.

When retirees have other health insurance, those companies are billed first.

"If their other insurance doesn't pay in full, TRICARE picks up the remainder of the bill to their doctor," Gibson said.

Concerns regarding dental benefits or outside pharmacy coverage such as Express Scripts can be answered by the health benefits advisor at KUSAHC. Health Net does not manage these benefits.

For more information about benefits, call Health Net Customer Service 1-877-874-TRICARE (1-877-874-2273) or visit <https://www.hnfs.net>.

TRICARE beneficiaries can skip copay during over-the-counter test

DoD Military Health System

TRICARE beneficiaries already experience low copayments on convenient mail order prescription drugs, now there is something even better—free.

A two-year test authorized by the 2007 National Defense Authorization Act allows TRICARE beneficiaries to substitute over-the-counter versions of certain prescription drugs without a copayment. For now, the test includes the TRICARE Mail Order Pharmacy only.

Plans call for expansion to retail network pharmacies once program details are ironed out.

"The drugs included in this test initially are among the most widely prescribed—those treating gastro-intestinal disorders," said Army Maj. Gen. Elder Granger, deputy director, TRICARE Management Activity.

Known as "proton pump inhibitors," this class of medication includes the prescription drugs Nexium, Prevacid, Aciphex, Protonix, Zegerid and Prilosec.

Under the test, beneficiaries receiving a prescription proton pump inhibitor are eligible to receive Prilosec OTC, the only proton pump inhibitor available over the counter. The Department of Defense Pharmacy and Therapeutic Committee found there is no significant clinical difference between Prilosec OTC and its prescription-only counterparts.

"By requesting that their doctors prescribe the OTC version, beneficiaries can

save money on their copay, and there is the additional potential to save the government money as well," Granger said. OTCs are generally less expensive—by as much as 400 percent in some cases.

Once the OTC test works its way to retail pharmacies, beneficiaries should not expect to walk into any drug store and get OTC products for free at the register, caution TRICARE officials. Beneficiaries will still have to get a prescription from their doctor for the OTC drugs.

Beneficiaries already taking the selected prescription proton pump inhibitors through the mail order pharmacy will get a letter telling them about the new program whenever they order medications that qualify them to participate in the OTC test project.

TRICARE encourages beneficiaries who haven't used the mail order pharmacy in the past but are taking medications included in the test, to get information on how to sign up at <http://www.tricare.mil/pharmacy/tmop.cfm>.

"Through the mail order program, initially beneficiaries can get up to a ninety-day supply and have it delivered right to their mailbox. Remember, it's free so it saves money for beneficiaries and potential savings to the government may help sustain the TRICARE benefit," Granger said.

Medication classes under consideration for future testing include topical anti-fungals and non-sedating antihistamines.

TriWest Resource Center provides online support to Guard, Reserve

Story by
ELIZABETH PERRINE
DoD Military Health System

TriWest Healthcare Alliance announced the launch of an online Guard and Reserve resource center, designed specifically for members of the National Guard and Reserve June 9.

Due to their often-times distant proximity to military bases, many National Guard and Reserve members and their Families are not able to access the resources and support networks built into an active duty military community. For that reason, TriWest's Guard and Reserve Resource Center, found at www.triwest.com, was developed with a virtual library of information for West Region TRICARE beneficiaries serving in the National Guard and Reserve, their Families and leadership.

"We understand the unique challenges faced by members of the Guard and Reserve and their Families," said TriWest President and CEO David J. McIntyre Jr. "Just trying to understand how TRICARE works or what to do throughout the stages of mobilization, deployment and reintegration can be challenging, especially if you don't know where to go for answers, or even what questions to ask."

The resource center offers the following resources for members of the Guard and Reserve and their Families:

- Streaming video outlining TRICARE benefits for Guard and Reserve members
- Guard and Reserve-specific news and updates, including TRICARE On Point, a quarterly e-newsletter
- Post-deployment support and behavioral health resources for the entire Family
- Links to more than 80 support agencies and programs
- Resources for military leadership

"Our nation's citizen warriors have been required to play a crucial role in the nation's defense," McIntyre said. "Creating a convenient resource that's accessible whenever they need it is another way TriWest can support these brave men and women and their Families."

TRICARE is the health care program for the military, administered by TriWest Healthcare Alliance throughout its 21-state West Region. For more information about the Guard and Reserve Resource Center or TRICARE benefits, visit www.triwest.com.

Commentary: Who were those Marines at the National Naval Medical Center?

Story by
S. WARD CASSCELLS
Assistant Secretary of Defense for Health Affairs

Recently, I visited the National Naval Medical Center in Bethesda, Md., and noticed a number of Marines whose passion for their work in assisting patients and Family members was unmistakable.

As a former Army guy, and now as a purple-suiter, I was curious to find out who they were.

They are part of the next generation of the Marine For Life program for injured support - the Wounded Warrior Regiment.

The Wounded Warrior Regiment provides support and assistance under a unity of command to ill, injured, or wounded Marines, Sailors who serve with Marines, and their Family members. Many Marines who support the regiment have been combat wounded themselves and are dedicating their lives to helping fellow Marines and Sailors through their recovery process.

Marine Commandant Gen. James Conway announced the new regiment on April 1. His vision is to provide outreach to all Marines who have served in the Global War on Terror since 2001.

As a future goal, the regiment intends to call on these

Marines individually each month and ask them if they need any healthcare assistance or other services.

Today, the regiment's focus is on the approximately 547 Marines who are on inpatient and outpatient status at Department of Defense and Department of Veterans Affairs facilities across the country.

Wounded, injured, or ill Marines and Sailors need a lot of resources and referrals, and sometimes, non-medical care can be just as important to the healing process as medical care. To prevent gaps in benefits, Marine Liaisons of the Wounded Warrior Regiment do such advance work as checking ahead to see if VA facilities are ready to receive patients - and if they are not, liaisons can extend a Marine's active service.

Marine liaisons manage patients using a single database that tracks them through their recovery and return to duty or to their hometowns. When patients and Families return home, the support continues with 135 reserve helpers who serve as Hometown Links throughout the United States. These helpers have already registered 7,500 employers and 2,000 mentors who are ready to embrace ill, injured, or

wounded Marines and sailors, and help them find meaningful employment.

The regiment ensures patients accountability in the management of non-medical phases of transition, according to Wounded Warrior Regiment Commander Col. Gregory Boyle.

While that is true, I would add that knowing the Wounded Warrior Regiment is there is as comforting to patients as a physician's touch. The new paradigm of care combines medical and non-medical case management and services, and most important, puts the patient and Family at the center.

After learning about the newly established Wounded Warrior Regiment, I now understand the passion and caring I saw that day at NNMC. It came from somewhere deep within those Marine Liaisons. They wore their shared values on their hearts.

One of my goals with this column is to inspire shared values in military health system staff. We have core values, and I will be writing about them soon. In the meantime, think about how you can find your inner passion to achieve job satisfaction. I have no doubt your passion will be linked to the shared values I propose.

LEAVE DONATIONS

To participate in the Voluntary Leave Program, use forms OPM 630, Application to Become a Leave Recipient Under the Voluntary Leave Transfer Program; OPF 630-A, Request to Donate Annual Leave to Leave Recipient Under the Voluntary Leave Transfer Program (within agency); and OPM 630-B, Request to Donate Annual Leave to Leave Recipient Under the Voluntary Leave Transfer Program (outside agency). For more information, call Ronda McKinney, 410-278-8988, or e-mail rondamckinney@usag.apg.army.mil.

Employees eligible for donations in the Voluntary Leave Transfer Program

James Addas	Shelia Davison (benign	failure)
Karen Blades	paroxysmal positional	Sandra Miller
Sarah Boats	vertigo)	Karen Moss
William Bond	Marc Devecchio	Gloria Morales
Sandra Boyd	Wayne L. Doyel	Trudie Norman
Debra Bonsall (daughter has brain tumor)	Dawn Folck	Cindy Orwig
Jeanie Bowman	Cathleen Holmes	Lester Pilcher
Teresa Bridges	David Harding	Judith Rembold
Linda Brown	Ira Hines	Barbara Seker
Rogelio Chevannes	Carolyn Johnson	Donna Sexton
Brett Christy	Reginald Johnson	Joyce Spies
George Colletta	Beverly King (caring for husband)	Alison Tichenor
James Craven	Cathryn Kropp	Elizabeth Usmari
Ruth Cunningham	Joyce Mauldin	Louis Winters
John Daigle	Louis McCarter (kidney	Sharon Woods
		Charles Young



Story by
LORI YERDON
U.S. Army Combat Readiness Center

With 81 percent of all U.S. households owning a charcoal, electric or gas grill, practicing a little common sense and adhering to safe barbecuing practices will reduce the chance of serious injury while grilling.

According to the Hearth, Patio & Barbecue Association, 60 percent of grill owners use their grills year-round; with 47 percent grilling at least one to two times per week during peak summer months.

The most popular grilling

occasions are Fourth of July, Memorial Day and Labor Day, but an increasing number of grillers report using their grills during the winter, too.

"Being responsible with grills, especially around children, is important," said Deidra Darsa, public relations & media relations manager for HPBA. "Always read the owners manual before using your grill, and follow specific usage, assembly and safety procedures."

Everyone must realize that when people are grilling, they're working with fire, and there's always a chance of get-

ting burned, added Darsa.

In May, while trying to light a grill, a Soldier was burned on his face and arms. He used an excessive amount of lighter fluid on some charcoal then closed the grill cover. When the Soldier attempted to light the grill a few moments later, it exploded resulting in first and second degree burns.

"Grilling-related accidents send numerous individuals to emergency rooms each year," said Col. John Campbell, command surgeon for the U.S. Army Combat Readiness Center. "By understanding safe techniques and precautions, the number

can be drastically reduced."

The HPBA offers the following safety tips to help keep grilling a safe and enjoyable experience:

- Use barbecue grills outdoors, only. Never barbecue in a trailer, tent, house, garage or any enclosed area because carbon monoxide may accumulate and cause a fatal injury.
- Ensure that grills are in an open area that is away from buildings, overhead combustible surfaces, dry leaves or brush.
- Use barbecue utensils with long handles, forks, tongs, etc., to avoid burns and splatters.
- Wear clothing that does not

have hanging shirt tails, frills, or apron strings that can catch fire, and use flame-retardant mitts when adjusting hot vents.

- Use baking soda to control a grease fire and have a fire extinguisher handy.
- Never leave a grill unattended once lit.
- Use grill pads or splatter mats, which are naturally heat resistant, usually made of lightweight composite cement or plastic, and will protect decks or patios from any grease that misses the drip pan.
- Don't allow anyone to conduct activity near the grill when in use or immediate-

ly following its use. The grill body remains hot up to an hour after being used.

- Never attempt to move a hot grill. It's easy to stumble or drop it.

"Soldiers, their Family members and friends should always exercise caution when grilling," Campbell said. "Don't let your safety guard down...enjoy, but stay safe."

Visit www.hpba.org and www.fsis.usda.gov for a more information on grilling safety. For more information on the 101 Critical Days of Summer safety campaign, visit <https://crc.army.mil>.

Grilling—keep it safe, enjoyable